

## **FIT QUALITY ASSURANCE AND IMPROVEMENT SYSTEM**

The FIT Quality Assurance and Improvement System consists of an initial 5-day training, ongoing FIT clinical support, monthly booster training, and quality assurance support through the monitoring of treatment fidelity/adherence.

### Initial 5-day training

Five days of initial training is provided for all clinical staff who will engage in treatment and/or clinical supervision of FIT cases. The objectives of the 5-day training are:

- To familiarize participants with the scope, correlates, and causes of the serious behavior problems addressed by FIT;
- To describe the theoretical and empirical underpinnings of the FIT treatment model;
- To describe the family, peer, school, and individual intervention strategies used;
- To train participants to conceptualize cases and interventions in terms of the principles of FIT; and
- To provide participants with practice in designing FIT interventions.

### Monthly meetings and training with the FIT Consultant

As therapists gain field experience with FIT, monthly meetings and training sessions are conducted to enhance therapists knowledge and skills in all components of the model.

### Weekly phone consultation with the FIT Consultant

Weekly phone consultation is provided for each treatment team (therapists and supervisor) by the FIT consultant. Consultation sessions focus on promoting adherence to FIT treatment principles, developing solutions to difficult clinical problems, and designing plans to overcome any barriers to obtaining strong treatment adherence and favorable outcomes for youths and families. As noted earlier, high treatment adherence is critical to obtaining favorable long-term outcomes for serious juvenile offenders, and, as such, the central goal of the training and consultation process is to maximize adherence to the MST principles.

### Quality assurance support for FIT using MST Quality Assurance Tools

Currently FIT Quality Assurance support activities focus on monitoring and enhancing program outcomes through increasing therapist adherence to the MST treatment model. Considerable research consistently supports the link between therapist adherence to MST treatment principles and youth outcomes. The MST Therapist Adherence Measure and the MST Supervisor Adherence Measure have been validated in the research on MST with antisocial and delinquent youth and are now being implemented by all licensed MST programs.